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## INFORMATION DISCLOSURES STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet	1	of	1

Complete if Known			
Application Number	10/523,816		
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First Named Inventor	Toshifumi HASHIBA		
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	Cite	Document Number		Publication Date		
	No.1	Number	Kind Code <sup>1</sup> (if known)	MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	
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Examiner	Cite	Fo	Foreign Patent Document		Publication Date	Name of Patentee or	
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Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city, and/or country where published.	Translation <sup>6</sup>	

Examiner Signature

Date Considered

02/06

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